

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**



App. No.: 10/067,506

Examiner : Kackar, Ram N

Filing Date: 02/07/2002

Art Unit : 1763

First Named Inventor : Ushioda

For: SUBSTRATE SUPPORTING TABLE, METHOD FOR PRODUCING SAME,  
AND PROCESSING SYSTEM

**RESPONSE TO FINAL OFFICE ACTION**

BOX AF  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

This response to the final Office Action mailed November 26, 2003 is being timely  
filed by the due date.

AMENDMENT OF THE CLAIMS section begins on page 2.

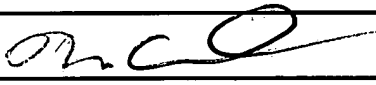
REMARKS begin on page 9.

U.S. PATENT & TRADEMARK OFFICE  
FEB 26 2004

Image AF

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/067,506	
	Filing Date	02/07/2002	
	First Named Inventor	Ushioda	
	Art Unit	1763	
	Examiner Name	Kackar, Ram N	
Total Number of Pages in This Submission		Attorney Docket Number	033082.120

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply  <input checked="" type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below):		
<table border="1"><tr><td>Remarks</td><td></td></tr></table>			Remarks	
Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Michael A. Makuch - Reg. 32,263
Signature	
Date	February 26, 2004

CERTIFICATE OF MAILING			
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